

T The Honorable Christopher M. Alston

Chapter 13

Hearing Date: December 14, 2017

Hearing Time: 9:30 AM

Hearing Location: US Courthouse /Seattle, WA

Response Due: December 7, 2017

UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF WASHINGTON AT SEATTLE

IN RE:

JOSE ORTIZ,

Debtors.

Case No. 17-13890

Chapter: 13

PROOF OF SERVICE

I, Christina L. Henry declare under penalty of perjury, that on the dates indicated below, I caused a copy of the following documents to be served on the parties listed below via Certified Mail:

- 1) Debtor's Motion to Avoid Lien of Midland Funding LLC with Notice of Hearing, Proposed Order and Declaration of Christina L Henry in Support

Via United States First Class Certified Mail on February 18, 2014

Midland Funding, LLC
Attn: Registered Agent
Corporation Service Company
300 Deschutes Way SW
Ste 304
Tumwater, WA 98501

(See Attached certified mail Return Receipt)

DATED this 15th day of November 2017

HENRY, DEGRAFF & MCCORMICK, P.S.

By: /s/ Christina L. Henry


Christina L. Henry, WSBA #31273

PROOF OF SERVICE - 1

HENRY, DEGRAFF & MCCORMICK, P.S.
1833 N 105TH ST, SUITE 200
SEATTLE, WASHINGTON 98104
telephone (206) 330-0595
fax (206) 400-7609

PROOF OF SERVICE - 2

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY												
<p> <input checked="" type="checkbox"/> Complete items 1, 2, and 3. <input checked="" type="checkbox"/> Print your name and address on the reverse so that we can return the card to you. <input checked="" type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits. </p>	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>X NOV 13 2017</p>												
<p>1. Article Addressed to:</p> <p><i>Midland Funding, LLC</i> <i>Attn: Registered Agent</i> <i>Corporation Service Company</i> <i>300 Deschutes Way SW, Ste 304</i> <i>Tumwater, WA 98501</i></p>	<p>B. Received by (Printed Name) Caroline Little</p> <p>C. Date of Delivery</p>												
<p>2. Article Number (Transfer from service label)</p> <p>7016 3010 0000 6942 6290</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>												
<p>  9590 9402 3399 7227 2319 41 </p>	<p>3. Service Type</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input checked="" type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Return Receipt for Merchandise</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> </table>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®												
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<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery												
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise												
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™												
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery												
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt</p>													

USPS TRACKING#



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United States
Postal Service

• Sender: Please print your name, address, and ZIP+4® in this box •

Henry, DeConeth & McConick PS
Attn: Christina Henry
1833 N 105th St Ste 203
Seattle WA 98133

